

Regulated Object Number:

Double Check/DC Detector Performance Test

Safety and Buildings Division P.O. Box 7302 Madison, WI 53707-7302 Fax: (608) 267-9723 TTY: (608) 264-8777

http://www.commerce.state.wi.us http://www.wisconsin.gov

Personal information you provide may be used for secondary purposes [Privacy Law, s.1504 (1)(m)].				
	print clearly in ba		nal information on bac	ck page.
Owner Name		Street Address		
City	State Zip Code	Owner's Contact Pers	on 1	Felephone Number
FACILITY INFORMATION				
Facility Name		Street Address		
City	Zip Code	County		
Assembly Location				
Manufacturer		Model		Serial Number
Size Assembly Ty	pe 🗆 DC	□ DC Detector		
INITIAL TEST 1 ST check ☐ Closed tight ☐ Leaked Static PSID	2 nd check □ Closed □ Leaked Static	tight	D	
FINAL TEST Closed tight Static PSID	☐ Closed Static	tightPS	ID	
DETECTOR BYPASS ASSEMBLY INI 1 ST check ☐ Closed tight ☐ Leaked Static PSID	2 nd check □ Closed □ Leaked	tight	ID	
DETECTOR BYPASS ASSEMBLY FIN Closed tight Static PSID	☐ Closed	tight PS		
ASSEMBLIES IN FIRE PROTECTI Forward Flow Test Designed flow rate			ude hose stream den	nand where applicableGPM
Indicating Control Valves ☐ No. one control valve open ☐ No. two control valve open Valve supervision: ☐ Tamper switch ☐ Locked				
Part (s) Replaced/Comments				
I HEREBY CERTIFY THE TEST RESULTS ARE TRUE AND THE TEST WAS CONDUCTED BY ME PERSONALLY.				
Tester Name (print)		Registr	ation No.	Time of Day
Tester Signature		P	none No.	Date

OWNER INFORMATION

The backflow preventer is a mechanical device designed to protect the potable water supply system from being contaminated. There is a physical connection to equipment or water of either unknown or questionable quality, thereby requiring the installation of the backflow preventer. In order to ensure that this device is working as designed, it must be periodically tested.

A test shall be conducted on each backflow preventer prior to it being put into service, after any repairs, and a minimum of once a year thereafter.

It is the responsibility of the owner to make sure the device is tested. The test shall be performed by a department registered Cross Connection Control Device tester.

<u>OWNER'S CONTACT PERSON:</u> The owner's contact person is the name of the person responsible for the backflow preventer maintenance and records. (**Note: Please provide full name.**)

OLD VALVE REPLACEMENT INFORMATION

If this test is for a replacement valve, please include all information for the replacement valve on this form. The manufacturer, model no., serial no., size, and the assembly type of the "old" valve must included on the comment line of this form.

DOUBLE CHECK VALVES AND DOUBLE DETECTOR CHECK VALVES INSTALLED IN FIRE PROTECTION SYSTEMS

A copy of this completed test must be attached to or located near the double check valve or double detector check valve.

MINIMUM REQUIREMENTS FOR PASSING TEST

DC and DC Detector

- The first check must close tight, and have a minimum static 1 PSID.
- The second check must close tight, and have a minimum static 1 PSID.

Do not send a copy of this report to the Department of Commerce, Safety and Buildings Division. Copies of this report shall be distributed to the following: Owner, purveyor, and tester as indicated on the bottom of each page.